

# City of Long Beach

## Utility Level Pay Plan Application

A program to assist Long Beach residents and business owners with their high gas bills by spreading charges over several months.

### Who is eligible:

Single family homeowners, tenants, multiunit building owners, and small and medium-sized business and commercial customers are generally eligible. Your utility bill may include charges for gas, water, sewer, and refuse services. All services will be included in the level pay plan amount. Customers must have three full months of services at the current location. For multiple accounts, record all pertinent account #s on the form or submit a separate listing.

### Who is not eligible:

Large commercial and industrial customers, transportation and exchange services customers and cogeneration and high efficiency air conditioning customers.

### Application Options and Instructions:

**MAIL IN:** Complete both sides of the Level Pay Plan application and mail to **City of Long Beach, PO Box 22619, Long Beach, CA 90802**. All information **MUST** be supplied.

You will be informed by mail or phone of your initial level pay plan payment amount. A "pay by date" will be included in this notice, and you must pay this amount promptly in order to qualify. Subsequent bills will reflect your level pay plan payment amount.

**WALK IN:** You may come to the lobby of City Hall for in-person application processing. You will be informed of your initial level pay plan in person, if you process your application with a Customer Service Representative. In addition, there are 24 hour drop boxes available. Drop off completed applications at City Hall or Long Beach Energy. **City Hall is located at 333 West Ocean Blvd., Long Beach; Long Beach Energy is located at 2400 East Spring Street.**

**PHONE IN:** Please note that we are experiencing extremely high caller volume. You may experience long wait times once you get into the phone system or be asked to call back at another time. To phone in your Level Pay Plan application, please call: **(562) 570-5700**.



**All applicable information MUST be supplied or the application may be rejected.**

### Information Needed:

#### Name on Account:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_ Business License#: \_\_\_\_\_

**Account Number from City Utility Bill:** \_\_\_\_\_

#### Service Address:

Street Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_

#### Your identification will be confirmed using the following information:

Social Security #: \_\_\_\_\_ or CA Driver's License #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

For Corporations Only: Federal Tax ID#: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please address the other side of this form and mail the completed form to us, so we can send your first level pay plan amount to you.

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Please print your name and mailing address below.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For Office Use Only

Level Pay Plan Amount: \$ \_\_\_\_\_.

Level Pay Plan Payment Due on:  
\_\_\_\_\_ / \_\_\_\_\_ / 2001